

IN THE UNITED STATES DISTRICT COURT  
FOR THE \_\_\_\_\_ DISTRICT OF TENNESSEE  
\_\_\_\_\_  
DIVISION

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THOMAS M. GOULD  
CLERK, U.S. DISTRICT COURT  
WD OF TN, MEMPHIS

Timothy Murley #317623, )  
\_\_\_\_\_, )  
\_\_\_\_\_, )  
\_\_\_\_\_, )  
\_\_\_\_\_, )  
Plaintiff(s), )

Vs.

Docket/Complaint No. \_\_\_\_\_

1) Robert D. Preston (HSA), )  
2) Melissa Breitling (Doctor), )  
3) Tracey Howell (medical staff), )  
4) C.C.A. (Corporate office), )  
Respondents. )

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AUG 10 2011  
JURY TRIAL DEMANDED  
CLERK, U.S. DIST. COURT  
WESTERN DIST. OF TENN.

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS  
UNDER 42 U.S.C. §1983

I. PREVIOUS LAWSUITS

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes ( ) No ( )

B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuit on another piece of paper, using the same outline.)

Plaintiff(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Defendant(s) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Court [if federal court, name the district; if state court, name the county]  
\_\_\_\_\_

3. Docket number: \_\_\_\_\_

4. Name of judge to whom case was assigned: \_\_\_\_\_

5. Disposition [for example: was the case dismissed? Was it appealed? Is it still pending?]  
\_\_\_\_\_

6. Approximate date of filing lawsuit: \_\_\_\_\_

7. Approximate date of disposition: \_\_\_\_\_

**II. PLACE OF PRESENT CONFINEMENT:**

**Whiteville Correctional Facility  
1440 Union Springs Road  
PO Box 679  
Whiteville, TN 38075**

A. Is there a prisoner grievance procedure in this institution? Yes (✓) No ( )

B. Did you present the facts relating to your Complaint in the state prisoner grievance procedure? Yes (✓) No ( )

C. If your answer is yes,

1. What steps did you take? Followed grievance procedures as set forth on grievance form.

2. What was the result? Returned - deemed inappropriate per TDOC/WCEA policy 501.01/No Multiple issues 501.01.VI.C.1

D. If your answer is "no" explain why not: \_\_\_\_\_

E. If there is no prisoner grievance procedure in the institution, did you complain to prison authorities? Yes ( ) No ( )

F. If your answer is yes,

1. What steps did you take? \_\_\_\_\_

2. What was the result? \_\_\_\_\_

### III. PARTIES:

[In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional Plaintiffs, if any.]

A. Name of Plaintiff(s): Timothy Murley # 317623

Address: Whiteville Correctional Facility

1440 Union Springs Road - Whiteville, TN 38075

[In item B below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item C for the names, positions and places of employment of any additional Defendants.]

B. Name of Defendant: 1) Robert D. Preston HSA, is employed  
 as Medical Director at Whiteville Correctional Facility  
1440 Union Springs Road  
Whiteville, TN. 38075

Name(s) of additional Defendants: \_\_\_\_\_

2) Melissa Breitling (Doctor) address same as above  
3) Tracey Howell (medical staff) address same as above  
C.C.A. Correction Corporation of America  
# 10 Burton Hills Blvd. Nashville, TN. 37215

#### IV. STATEMENT OF CLAIM:

[State here as briefly as possible the facts of your case. Describe how each Defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach additional sheets if needed.]

1. Plaintiff was and is being treated with Cruel and unusual punishment and suffers deprivation of adequate medical care by defendants ①, ②, + ③.  
As to the subjective portion of the plaintiffs rights, defendant's ① ② + ③  
named in this complaint was deliberately indifferent to the plaintiffs  
serious medical needs, in that said, defendants ① ② + ③ consciously  
or recklessly contributed to, or had knowledge of the plaintiff's harm-  
ful condition and did little to nothing to correct it. This resulted in the  
actual and/or potential serious harm to the plaintiff. "Such as the  
bacterium E-COLI poisoning, which put plaintiff in fear for his life.  
Defendants ① ② + ③ acted under color of state or federal law in the  
course of their official capacity or employment. Defendants ① ② + ③

cont. ~~11~~  
 ON  
 4a

B. Name of Defendant: \_\_\_\_\_, is employed  
as \_\_\_\_\_ at \_\_\_\_\_

Name(s) of additional Defendants: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### IV. STATEMENT OF CLAIM:

[State here as briefly as possible the facts of your case. Describe how each Defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach additional sheets if needed.]

4a Supervisors are liable, under the theory of "Respondent Superior"  
in that the named supervisors were either aware of the unlawful conduct  
of subordinates and failed to correct it, or the training of subordinates  
was so inadequate that it resulted in the deliberate indifference of  
the plaintiffs constitutional rights. Defendants ①, ② & ③ are being  
sued in their individual or personal capacities for monetary  
damages from their personal assets. Please see General  
Allegations Part A thru F and hand written notes pertaining  
to defendants ①, ② & ③.

2. Defendant C.C.A. (Correctional corporation of America) is being  
sued for violation of, and charged with the denial of adequate  
medical procedures in compliance with the requirements of  
the United states constitution. 4a

V. RELIEF

[State briefly EXACTLY what you want the Court to do for you.] Make no legal arguments.

Cite no statutes.]

Defendant #① Robert D. Preston HSA of Whiteville Correctional Facility 1440 Union Springs Road Whiteville, TN. 38075  
is being sued for the monetary damages of one million Dollars  
Defendant #② Melissa Breitling (Doctor) of same address  
is being sued for the monetary damages of one Million Dollars  
Defendant #③ Tracey Howell (medical staff) of same address  
is being sued for the monetary damages of one million Dollars  
Defendant C.C.A. (Correctional Corporation of America) of  
10 Burton Hills Blvd. Nashville, TN. 37215  
is being sued for the monetary damages of Twenty Five Million  
Dollars. Each defenant contributed to Mr. Murley's pain, suffering  
Signed on this 9<sup>th</sup> day of JULY, 20 11. and emotional distress.

Timothy W. Murley  
Plaintiff

I declare under penalty of perjury that the foregoing is true and exact, to the best of my knowledge, information and belief.

9<sup>th</sup> July 2011  
Date

Timothy W. Murley  
Plaintiff

Inmate Name: \_\_\_\_\_

TDOC#: \_\_\_\_\_

**CERTIFICATE OF PRISON OFFICIAL**

I hereby certify that the affiant has the sum of \$ \_\_\_\_\_ on account to his credit at the Whiteville Correctional Facility, where he is confined. I further certify the affiant's average monthly deposits to his prison trust fund account, for the past six (6) month period immediately preceding the filing of this Affidavit, are \$ \_\_\_\_\_.

\_\_\_\_\_  
(Official's Signature)

\_\_\_\_\_  
Date:

SWORN AND SUBSCRIBED before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
My Commission expires